

# PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004  
Annual Plan for Fiscal Year 2001

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN  
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan  
Agency Identification**

**PHA Name:** Revere Housing Authority

**PHA Number:** MA014

**PHA Fiscal Year Beginning: (mm/yyyy)** 03/2001

**Public Access to Information**

**Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)**

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices

**Display Locations For PHA Plans and Supporting Documents**

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices
- ☐ Main administrative office of the local government
- ☐ Main administrative office of the County government
- ☐ Main administrative office of the State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2000 - 2004**  
[24 CFR Part 903.5]

**A. Mission**

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

- ☐ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- ☐ The PHA's mission is: (state mission here)

**B. Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- ☐ PHA Goal: Expand the supply of assisted housing  
Objectives:
- ☐ Apply for additional rental vouchers:
  - ☐ Reduce public housing vacancies:
  - ☐ Leverage private or other public funds to create additional housing opportunities:
  - ☐ Acquire or build units or developments
  - ☐ Other (list below)
- ☐ PHA Goal: Improve the quality of assisted housing  
Objectives:
- ☐ Improve public housing management: (PHAS score)
  - ☐ Improve voucher management: (SEMAP score)
  - ☐ Increase customer satisfaction:
  - ☐ Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

- ☐ Renovate or modernize public housing units:
  - ☐ Demolish or dispose of obsolete public housing:
  - ☐ Provide replacement public housing:
  - ☐ Provide replacement vouchers:
  - ☐ Other: (list below)
- ☐ PHA Goal: Increase assisted housing choices
- Objectives:
- ☐ Provide voucher mobility counseling:
  - ☐ Conduct outreach efforts to potential voucher landlords
  - ☐ Increase voucher payment standards
  - ☐ Implement voucher homeownership program:
  - ☐ Implement public housing or other homeownership programs:
  - ☐ Implement public housing site-based waiting lists:
  - ☐ Convert public housing to vouchers:
  - ☐ Other: (list below)

**HUD Strategic Goal: Improve community quality of life and economic vitality**

- ☐ PHA Goal: Provide an improved living environment
- Objectives:
- ☐ Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
  - ☐ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
  - ☐ Implement public housing security improvements:
  - ☐ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
  - ☐ Other: (list below)

**HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

- ☐ PHA Goal: Promote self-sufficiency and asset development of assisted households
- Objectives:
- ☐ Increase the number and percentage of employed persons in assisted families:
  - ☐ Provide or attract supportive services to improve assistance recipients' employability:

- ☐ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ☐ Other: (list below)

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

- ☐ PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
  - ☐ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
  - ☐ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
  - ☐ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
  - ☐ Other: (list below)

**Other PHA Goals and Objectives: (list below)**

**Annual PHA Plan**  
**PHA Fiscal Year 2000**  
[24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

☐ **Standard Plan**

**Streamlined Plan:**

☒ **High Performing PHA**  
☒ **Small Agency (<250 Public Housing Units)**  
☐ **Administering Section 8 Only**

☐ **Troubled Agency Plan**

**ii. Executive Summary of the Annual PHA Plan**

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

**The Revere Housing Authority has prepared this Agency Plan in compliance with sect. 511 of the Quality Housing and Work Responsibility Act of 1998 and the ensuing HUD requirements.**

**We have adopted a policy which will ensure that we comply with the mandate to promote safe, decent and affordable housing. The Authority's Mission Statement details, more concisely, what our goals are. The Authority will strive to retain it high performing status as endeavored under the previous PHMAP program, under the Department's new PHAs and SEMAP program, which are in the process of being promulgated for FY 2001.**

**On our goal to provide a safe and secure environment for our tenants, the Authority through the drug grant of FY 2000 will work with local enforcement agencies to eradicate the crime and devise strategies fir identifying and reducing existing safety problems.**

**In an effort to expand the ranges and quality of housing, the Authority will rigorously pursue an outreach program which targets**

**all constituents of public housing, encompassing the wide spectrum of low to moderate income families.**

**All the plans, statements, budget summaries, policies, etc., as set forth in our Annual Plan, we hope will achieve our goals and objectives. The following are just a few highlights of our Annual Plan:**

- \* We have adopted three local preferences: for local residents,  
for working families (seniors and people with disabilities automatically receive this preference), and victims of domestic violence.**
- We have adopted an aggressive screening policy for public housing to ensure to the best of our ability that new admissions will be good neighbors. On our Section 8 program, we are screening applicants to the fullest extent allowable, while not taking away the ultimate responsibility from the landlord. Our screening practices will meet all fair housing requirements.**
- We have implemented a deconcentration policy.**
- Applicants will be selected from the waiting list by preference and in order of the date and time of application.**
- We have established a minimum rent of \$25.00.**

**In summary, the Revere Housing Authority is and will continue to provide, within these parameters and mandates of the Quality Housing and Work Responsibility Act of 1998, safe, decent and affordable housing for all our citizens.**

### **iii Annual Plan Table of Contents**

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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#### **Attachments**

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

#### **Required Attachments:**

- ☒ Admissions Policy for Deconcentration
- ☒ FY 2001 Capital Fund Program Annual Statement
- ☐ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

#### **Optional Attachments:**

- ☐ PHA Management Organizational Chart
- ☐ FY 2001 Capital Fund Program 5 Year Action Plan
- ☒ Public Housing Drug Elimination Program (PHDEP) Plan



- ☒ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- ☐ Other (List below, providing each attachment name)

### Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing	Annual Plan: Rent Determination

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	A & O Policy	
X	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
N/A	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

## **1. Statement of Housing Needs**

[24 CFR Part 903.7 9 (a)]

### **A. Housing Needs of Families in the Jurisdiction/s Served by the PHA**

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
<b>Family Type</b>	<b>Overall</b>	<b>Afford-ability</b>	<b>Supply</b>	<b>Quality</b>	<b>Access-ibility</b>	<b>Size</b>	<b>Loca-tion</b>
Income <= 30% of AMI	N/A						
Income >30% but <=50% of AMI	N/A						
Income >50% but <80% of AMI	N/A						
Elderly	N/A						
Families with Disabilities	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☐ Consolidated Plan of the Jurisdiction/s  
Indicate year:
- ☐ U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- ☐ American Housing Survey data  
Indicate year:
- ☐ Other housing market study  
Indicate year:
- ☐ Other sources: (list and indicate year of information)

\*Please note:

The above requested information is not available to the RHA at this time, this field cannot be completed.

## **B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists**

State the housing needs of the families on the PHA’s waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site based or sub-jurisdictional public housing waiting lists at their option.

<b>Housing Needs of Families on the Waiting List</b>
--

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
X Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	1929		
Extremely low income <=30% AMI	1101	57	
Very low income (>30% but <=50% AMI)	728	38	
Low income (>50% but <80% AMI)	100	5	
Families with children	1516	79	
Elderly families	252	13	
Families with Disabilities	296	16	
Race/ethnicity	White (non) 981	51	
Race/ethnicity	Black (non) 376	20	
Race/ethnicity	Amer. Ind. (non) 21	1	
Race/ethnicity	Asian 109	6	
	Hispanic 442	22	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	218	19	10
2 BR	610	53	11
3 BR	278	25	5
4 BR	43	3	
5 BR	0		
5+ BR	0		

Housing Needs of Families on the Waiting List
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes    Section 8 Waiting list is closed. If yes: How long has it been closed (# of months)? 30 Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

### C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

#### (1) Strategies

**Need: Shortage of affordable housing for all eligible populations**

**Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:**

Select all that apply

- ☒ X    Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ☒ X    Reduce turnover time for vacated public housing units
- ☒ X    Reduce time to renovate public housing units
- ☐    Seek replacement of public housing units lost to the inventory through mixed finance development
- ☐    Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- ☒ X    Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- ☒ X    Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- ☒ X    Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- ☒ X    Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program  
Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- ☐    Other (list below)

**Strategy 2: Increase the number of affordable housing units by:**

Select all that apply

- ☒ Apply for additional section 8 units should they become available
- ☐ Leverage affordable housing resources in the community through the creation of mixed - finance housing
- ☐ Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- ☐ Other: (list below)

**Need: Specific Family Types: Families at or below 30% of median****Strategy 1: Target available assistance to families at or below 30 % of AMI**

Select all that apply

- ☒ Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- ☒ Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- ☒ Employ admissions preferences aimed at families with economic hardships
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

**Need: Specific Family Types: Families at or below 50% of median****Strategy 1: Target available assistance to families at or below 50% of AMI**

Select all that apply

- ☒ Employ admissions preferences aimed at families who are working
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

**Need: Specific Family Types: The Elderly****Strategy 1: Target available assistance to the elderly:**

Select all that apply

- ☐ Seek designation of public housing for the elderly
- ☒ Apply for special-purpose vouchers targeted to the elderly, should they become available
- ☐ Other: (list below)

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

- ☐ Seek designation of public housing for families with disabilities
- ☒ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- ☒ Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- ☒ Affirmatively market to local non-profit agencies that assist families with disabilities
- ☐ Other: (list below)

**Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

**Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:**

Select if applicable

- ☒ Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- ☐ Other: (list below)

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

- ☒ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- ☒ Market the section 8 program to owners outside of areas of poverty /minority concentrations
- ☐ Other: (list below)

**Other Housing Needs & Strategies: (list needs and strategies below)**

**(2) Reasons for Selecting Strategies**

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- ☒ Funding constraints
- ☒ Staffing constraints
- ☒ Limited availability of sites for assisted housing
- ☐ Extent to which particular housing needs are met by other organizations in the community



- ☐ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- X Influence of the housing market on PHA programs
- X Community priorities regarding housing assistance
- X Results of consultation with local or state government
- X Results of consultation with residents and the Resident Advisory Board
- ☐ Results of consultation with advocacy groups
- ☐ Other: (list below)

## **2. Statement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant -based assistance, Section 8 supportive services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2001 grants)</b>		
a) Public Housing Operating Fund	224,936	
b) Public Housing Capital Fund	276,872	
c) HOPE VI Revitalization	N/A	
d) HOPE VI Demolition	N/A	
e) Annual Contributions for Section 8 Tenant-Based Assistance	3,597,248	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	47,664	
g) Resident Opportunity and Self-Sufficiency Grants	N/A	
h) Community Development Block Grant	N/A	
i) HOME	N/A	
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
MA06PO14501-00	222,443	Capital Improvements
MA06DEP0140100	44,469	

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
MA06DEP0140199	1,560	
<b>3. Public Housing Dwelling Rental Income</b>	686,416	Operations
<b>All Sites</b>		
<b>4. Other income</b> (list below)	29,700	Operations
<b>4. Non-federal sources</b> (list below)		
<b>Total resources</b>	5,131,308	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24 CFR Part 903.7 9 (c)]

#### **A. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

##### **(1) Eligibility**

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- ☒ When families are within a certain number of being offered a unit: (state number)
- ☐ When families are within a certain time of being offered a unit: (state time)
- ☐ Other: (describe)

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- ☒ Criminal or Drug-related activity
- ☒ Rental history
- ☒ Housekeeping
- ☐ Other (describe)

- c. ☐ Yes X No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- d. X Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- e. ☐ Yes X No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

## **(2)Waiting List Organization**

- a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- X Community-wide list
- ☐ Sub-jurisdictional lists
- ☐ Site-based waiting lists
- ☐ Other (describe)

- b. Where may interested persons apply for admission to public housing?

- X PHA main administrative office
- X PHA development site management office
- X Other (list below)

By Mail

- c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year?  
None

2. ☐ Yes ☐ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  
If yes, how many lists?

3. ☐ Yes ☐ No: May families be on more than one list simultaneously  
If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
- ☐ PHA main administrative office

- ☐ All PHA development management offices
- ☐ Management offices at developments with site-based waiting lists
- ☐ At the development to which they would like to apply
- ☐ Other (list below)

### **(3) Assignment**

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- X One
- ☐ Two
- ☐ Three or More

b. X Yes ☐ No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

### **(4) Admissions Preferences**

a. Income targeting:

X Yes ☐ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

- X Emergencies
- X Overhoused
- X Underhoused
- X Medical justification
- X Administrative reasons determined by the PHA (e.g., to permit modernization work)
- ☐ Resident choice: (state circumstances below)
- ☐ Other: (list below)

c. Preferences

1. X Yes ☐ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- X Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  
X Victims of domestic violence  
☐ Substandard housing  
☐ Homelessness  
X High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- X Working families and those unable to work because of age or disability  
☐ Veterans and veterans' families  
X Residents who live and/or work in the jurisdiction  
X Those enrolled currently in educational, training, or upward mobility programs  
☐ Households that contribute to meeting income goals (broad range of incomes)  
☐ Households that contribute to meeting income requirements (targeting)  
☐ Those previously enrolled in educational, training, or upward mobility programs  
X Victims of reprisals or hate crimes  
☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences:

- 1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  
2 Victims of domestic violence  
Substandard housing  
Homelessness  
2 High rent burden

Other preferences (select all that apply)

- 4 Working families and those unable to work because of age or disability  
☐ Veterans and veterans' families  
3 Residents who live and/or work in the jurisdiction

- 4      Those enrolled currently in educational, training, or upward mobility programs  
☐      Households that contribute to meeting income goals (broad range of incomes)  
☐      Households that contribute to meeting income requirements (targeting)  
☐      Those previously enrolled in educational, training, or upward mobility programs  
2      Victims of reprisals or hate crimes  
☐      Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- ☐      The PHA applies preferences within income tiers  
X      Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

**(5) Occupancy**

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- X      The PHA-resident lease  
X      The PHA's Admissions and (Continued) Occupancy policy  
X      PHA briefing seminars or written materials  
☐      Other source (list)

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- X      At an annual reexamination and lease renewal  
X      Any time family composition changes  
X      At family request for revision  
☐      Other (list)

**(6) Deconcentration and Income Mixing**

- a. X Yes ☐ No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. ☒ Yes ☐ No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

☐ Adoption of site based waiting lists  
If selected, list targeted developments below:

☒ Employing waiting list “skipping” to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:

14-1 and 14-2

☐ Employing new admission preferences at targeted developments  
If selected, list targeted developments below:

☐ Other (list policies and developments targeted below)

d. ☐ Yes ☒ No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

- ☐ Additional affirmative marketing
- ☐ Actions to improve the marketability of certain developments
- ☐ Adoption or adjustment of ceiling rents for certain developments
- ☐ Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- ☐ Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

☐ Not applicable: results of analysis did not indicate a need for such efforts

☒ List (any applicable) developments below:

14-1 and 14-2

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

☒ Not applicable: results of analysis did not indicate a need for such efforts

☐ List (any applicable) developments below:

## B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

### (1) Eligibility

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- X Criminal or drug-related activity only to the extent required by law or regulation
- ☐ Criminal and drug-related activity, more extensively than required by law or regulation
- ☐ More general screening than criminal and drug-related activity (list factors below)
- ☐ Other (list below)
- b. ☐ Yes X No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. X Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. ☐ Yes X No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- ☐ Criminal or drug-related activity
- X Other (describe below)
- Former Address of prospective tenants

### (2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- X None
- ☐ Federal public housing
- ☐ Federal moderate rehabilitation
- ☐ Federal project-based certificate program
- ☐ Other federal or local program (list below)
- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)



- X PHA main administrative office  
☐ Other (list below)

**(3) Search Time**

- a. X Yes ☐ No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

- Medical Hardship
- Tight Rental Market
- Time to find units outside high poverty areas.

**(4) Admissions Preferences**

- a. Income targeting

- ☐ Yes X No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

- b. Preferences

1. X Yes ☐ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- X Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- X Victims of domestic violence
- ☐ Substandard housing
- ☐ Homelessness
- X High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- X Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- X Residents who live and/or work in your jurisdiction
- X Those enrolled currently in educational, training, or upward mobility programs

- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- X Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

#### Date and Time

#### Former Federal preferences

- 1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 2 Victims of domestic violence
- Substandard housing
- Homelessness
- 2 High rent burden

#### Other preferences (select all that apply)

- 4 Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- 3 Residents who live and/or work in your jurisdiction
- 4 Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- 2 Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- ☐ Date and time of application
- X Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one)

- ☒ This preference has previously been reviewed and approved by HUD  
☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- ☐ The PHA applies preferences within income tiers  
☒ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

#### **(5) Special Purpose Section 8 Assistance Programs**

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- ☒ The Section 8 Administrative Plan  
☒ Briefing sessions and written materials  
☐ Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- ☒ Through published notices  
☐ Other (list below)

### **4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

#### **A. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

#### **(1) Income Based Rent Policies**

Describe the PHA’s income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

- ☐ The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

- X The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0  
X \$1-\$25  
☐ \$26-\$50

2. X Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:

**Medical Hardship**

c. Rents set at less than 30% than adjusted income

1. X Yes ☐ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

Exhibit F – Flat Rent

- d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- X For the earned income of a previously unemployed household member  
X For increases in earned income  
☐ Fixed amount (other than general rent-setting policy)  
If yes, state amount/s and circumstances below:

- ☐ Fixed percentage (other than general rent-setting policy)  
If yes, state percentage/s and circumstances below:

- ☐ For household heads
- X For other family members (Full-Time Student Income Exclusion – 25 yrs or younger.)
- ☐ For transportation expenses
- X For the non-reimbursed medical expenses of non-disabled or non-elderly families
- ☐ Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- X Yes for all developments
- ☐ Yes but only for some developments
- ☐ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- X For all developments
- ☐ For all general occupancy developments (not elderly or disabled or elderly only)
- ☐ For specified general occupancy developments
- ☐ For certain parts of developments; e.g., the high-rise portion
- ☐ For certain size units; e.g., larger bedroom sizes
- ☐ Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- X Market comparability study
- X Fair market rents (FMR)
- ☐ 95<sup>th</sup> percentile rents
- ☐ 75 percent of operating costs
- ☐ 100 percent of operating costs for general occupancy (family) developments
- ☐ Operating costs plus debt service
- X The “rental value” of the unit
- ☐ Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- ☐ Never  
☐ At family option  
☐ Any time the family experiences an income increase  
X Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) More than a 10% increase in income.  
☐ Other (list below)

- g. ☐ Yes X No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

## **(2) Flat Rents**

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)
- ☐ The section 8 rent reasonableness study of comparable housing  
X Survey of rents listed in local newspaper  
X Survey of similar unassisted units in the neighborhood  
☐ Other (list/describe below)

## **B. Section 8 Tenant-Based Assistance**

Exemptions: PHAs that do not administer Section 8 tenant based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

### **(1) Payment Standards**

Describe the voucher payment standards and policies.

- a. What is the PHA's payment standard? (select the category that best describes your standard)
- ☐ At or above 90% but below 100% of FMR  
☐ 100% of FMR  
X Above 100% but at or below 110% of FMR

- ☐ Above 110% of FMR (if HUD approved; describe circumstances below)
- b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)
- ☐ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
  - ☐ The PHA has chosen to serve additional families by lowering the payment standard
  - ☐ Reflects market or submarket
  - ☐ Other (list below)
- c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)
- ☒ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
  - ☒ Reflects market or submarket
  - ☒ To increase housing options for families
  - ☐ Other (list below)
- d. How often are payment standards reevaluated for adequacy? (select one)
- ☒ Annually
  - ☐ Other (list below)
- e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)
- ☒ Success rates of assisted families
  - ☒ Rent burdens of assisted families
  - ☐ Other (list below)

## **(2) Minimum Rent**

- a. What amount best reflects the PHA's minimum rent? (select one)
- ☐ \$0
  - ☒ \$1-\$25
  - ☐ \$26-\$50
- b. ☐ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

## **5. Operations and Management**

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

- ☐ An organization chart showing the PHA's management structure and organization is attached.
- ☐ A brief description of the management structure and organization of the PHA follows:

### **B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	194	20
Section 8 Vouchers	351	20
Section 8 Certificates	75	10
Section 8 Mod Rehab	N/A	
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	
Public Housing Drug Elimination Program (PHDEP)	194	
Other Federal Programs(list individually)		

### **C. Management and Maintenance Policies**



List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

(2) Section 8 Management: (list below)

## **6. PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

### **A. Public Housing**

1. Yes X No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- X PHA main administrative office  
☐ PHA development management offices  
☐ Other (list below)

### **B. Section 8 Tenant-Based Assistance**

1. Yes X No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

X PHA main administrative office

☐ Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

### **A. Capital Fund Activities**

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

#### **(1) Capital Fund Program Annual Statement**

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

☐ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)

-or-

X The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

#### **(2) Optional 5-Year Action Plan**

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. ☐ Yes X No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

☐ The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name)

-or-

- ☐ The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

## **B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)**

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- ☐ Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
- b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)
  - ☐ Revitalization Plan under development
  - ☐ Revitalization Plan submitted, pending approval
  - ☐ Revitalization Plan approved
  - ☐ Activities pursuant to an approved Revitalization Plan underway

- ☐ Yes ☐ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
- If yes, list development name/s below:

- ☐ Yes ☐ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
- If yes, list developments or activities below:

- ☐ Yes ☐ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?
- If yes, list developments or activities below:

## **8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

### 2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

<b>Demolition/Disposition Activity Description</b>
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

## **9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities**

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes X No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

Designation of Public Housing Activity Description
1a. Development name:
1b. Development (project) number:
2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA’s Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected:
7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

## **10. Conversion of Public Housing to Tenant-Based Assistance**

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

### **A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act**

1. ☐ Yes ☒ No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

#### **2. Activity Description**

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

<b>Conversion of Public Housing Activity Description</b>
1a. Development name: 1b. Development (project) number:
2. What is the status of the required assessment? <input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status) <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) <input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved:

- ☐ Units addressed in a pending or approved HOPE VI demolition application  
(date submitted or approved: \_\_\_\_\_)
- ☐ Units addressed in a pending or approved HOPE VI Revitalization Plan  
(date submitted or approved: \_\_\_\_\_)
- ☐ Requirements no longer applicable: vacancy rates are less than 10 percent
- ☐ Requirements no longer applicable: site now has less than 300 units
- ☐ Other: (describe below)

#### **B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937**

#### **C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937**

### **11. Homeownership Programs Administered by the PHA**

[24 CFR Part 903.7 9 (k)]

#### **A. Public Housing**

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. ☐ Yes X No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

#### **2. Activity Description**

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing

Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name:	
1b. Development (project) number:	
2. Federal Program authority:	
<input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)	
3. Application status: (select one)	
<input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application	
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)	
5. Number of units affected:	
6. Coverage of action: (select one)	
<input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	

## B. Section 8 Tenant Based Assistance

1. ☐ Yes X No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to component 12; if “yes”, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

### 2. Program Description:

#### a. Size of Program

- ☐ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)



- ☐ 25 or fewer participants
- ☐ 26 - 50 participants
- ☐ 51 to 100 participants
- ☐ more than 100 participants

b. PHA-established eligibility criteria

- ☐ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

## **12. PHA Community Service and Self-sufficiency Programs**

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

### **A. PHA Coordination with the Welfare (TANF) Agency**

1. Cooperative agreements:

- ☐ Yes ☒ No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- ☐ Client referrals
- ☐ Information sharing regarding mutual clients (for rent determinations and otherwise)
- ☐ Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- ☐ Jointly administer programs
- ☐ Partner to administer a HUD Welfare-to-Work voucher program
- ☐ Joint administration of other demonstration program
- ☐ Other (describe)

### **B. Services and programs offered to residents and participants**

#### **(1) General**

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- ☐ Public housing rent determination policies
- ☐ Public housing admissions policies
- ☐ Section 8 admissions policies
- ☐ Preference in admission to section 8 for certain public housing families
- ☐ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- ☐ Preference/eligibility for public housing homeownership option participation
- ☐ Preference/eligibility for section 8 homeownership option participation
- ☐ Other policies (list below)

b. Economic and Social self-sufficiency programs

- ☐ Yes ☐ No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If “yes”, complete the following table; if “no” skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use. )

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)

## **(2) Family Self Sufficiency program/s**

### **a. Participation Description**

<b>Family Self Sufficiency (FSS) Participation</b>		
<b>Program</b>	<b>Required Number of Participants (start of FY 2000 Estimate)</b>	<b>Actual Number of Participants (As of: DD/MM/YY)</b>
Public Housing		
Section 8		

- b. ☐ Yes ☐ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?  
If no, list steps the PHA will take below:

### **C. Welfare Benefit Reductions**

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)
- ☐ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
  - ☐ Informing residents of new policy on admission and reexamination
  - ☐ Actively notifying residents of new policy at times in addition to admission and reexamination.
  - ☐ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
  - ☐ Establishing a protocol for exchange of information with all appropriate TANF agencies
  - ☐ Other: (list below)

### **D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937**

## **13. PHA Safety and Crime Prevention Measures**

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are

participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

**A. Need for measures to ensure the safety of public housing residents**

1. Describe the need for measures to ensure the safety of public housing residents

(select all that apply)

- ☐ High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- ☐ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- ☐ Residents fearful for their safety and/or the safety of their children
- ☐ Observed lower-level crime, vandalism and/or graffiti
- ☐ People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- ☐ Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

- ☐ Safety and security survey of residents
- ☐ Analysis of crime statistics over time for crimes committed “in and around” public housing authority
- ☐ Analysis of cost trends over time for repair of vandalism and removal of graffiti
- ☐ Resident reports
- ☐ PHA employee reports
- ☐ Police reports
- ☐ Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- ☐ Other (describe below)

3. Which developments are most affected? (list below)

**B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year**

1. List the crime prevention activities the PHA has undertaken or plans to undertake:

(select all that apply)

- ☐ Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- ☐ Crime Prevention Through Environmental Design
- ☐ Activities targeted to at-risk youth, adults, or seniors

- ☐ Volunteer Resident Patrol/Block Watchers Program  
☐ Other (describe below)

2. Which developments are most affected? (list below)

### **C. Coordination between PHA and the police**

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- ☐ Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan  
☐ Police provide crime data to housing authority staff for analysis and action  
☐ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)  
☐ Police regularly testify in and otherwise support eviction cases  
☐ Police regularly meet with the PHA management and residents  
☐ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services  
☐ Other activities (list below)

2. Which developments are most affected? (list below)

### **D. Additional information as required by PHDEP/PHDEP Plan**

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

X Yes ☐ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

X Yes ☐ No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?

XYes ☐ No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

## **14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

See attached Exhibit "K"

## **15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

## **16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

1. X Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?  
(If no, skip to component 17.)
2. X Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
3. ☐ Yes X No: Were there any findings as the result of that audit?
4. ☐ Yes ☐ No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? \_\_\_\_\_
5. ☐ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)?

## **17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. ☐ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)  
☐ Not applicable  
☐ Private management  
☐ Development-based accounting  
☐ Comprehensive stock assessment  
☐ Other: (list below)
3. ☐ Yes ☐ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

## **18. Other Information**

[24 CFR Part 903.7 9 (r)]

### **A. Resident Advisory Board Recommendations**

1. X Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)  
X Attached at Attachment (File name) Exhibit I Page 4  
☐ Provided below:
3. In what manner did the PHA address those comments? (select all that apply)  
☐ Considered comments, but determined that no changes to the PHA Plan were necessary.  
☐ The PHA changed portions of the PHA Plan in response to comments  
List changes below:
- X Other: (list below)  
This PHA plan was developed in conjunction with the RAB at many meetings during the year.

### **B. Description of Election process for Residents on the PHA Board**

1. ☐ Yes X No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
2. X Yes ☐ No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

#### **3. Description of Resident Election Process**

- a. Nomination of candidates for place on the ballot: (select all that apply)  
X Candidates were nominated by resident and assisted family organizations  
☐ Candidates could be nominated by any adult recipient of PHA assistance  
X Self-nomination: Candidates registered with the PHA and requested a place on ballot  
☐ Other: (describe)
- b. Eligible candidates: (select one)  
☐ Any recipient of PHA assistance  
☐ Any head of household receiving PHA assistance

- ☐ Any adult recipient of PHA assistance
- X Any adult member of a resident or assisted family organization
- ☐ Other (list)

c. Eligible voters: (select all that apply)

- X All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- ☐ Representatives of all PHA resident and assisted family organizations
- ☐ Other (list)

### C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: Revere
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
  - ☐ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
  - ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
  - X The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
  - ☐ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- X Other:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments:(describe below)

### D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.



## **Attachments**

Use this section to provide any additional attachments referenced in the Plans.

### PHA Plan Table Library

Exhibit A

Exhibit B

Exhibit C

Exhibit D

Exhibit E

Exhibit F

Exhibit G

Exhibit I

Exhibit K

### Deconcentration Policy

### PHDEP Plan Template

Exhibit M

Exhibit N

## PHA Plan Table Library

### Component 7 Capital Fund Program Annual Statement Parts I, II, and II

#### Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number      FFY of Grant Approval: 03/2001  
 MA 06 P01450101  
☒ Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	0
2	1406 Operations	57,000
3	1408 Management Improvements	30,000
4	1410 Administration	40,000
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	10,000
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	106,872
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Nondwelling Structures	33,000
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	<b>276,872</b>
21	Amount of line 20 Related to LBP Activities	0
22	Amount of line 20 Related to Section 504 Compliance	0
23	Amount of line 20 Related to Security	0
24	Amount of line 20 Related to Energy Conservation Measures	0

**Annual Statement**  
**Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
HA-Wide	Operations	1406	57,000
HA-Wide	Management Improvements	1408	30,000
HA-Wide	Administration	1410	40,000
HA-Wide	A/E	1430	10,000
14-2 & 2	Painting; windows, doors	1460	106,872
HA-Wide	Office - Residents	1470	33,000

**Annual Statement****Capital Fund Program (CFP) Part III: Implementation Schedule**

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
HA-Wide Operations	3-31-2003	9-30-2003
HA-Wide Management Improvements	3-31-2003	9-30-2003
HA-Wide Administration	3-31-2003	9-30-2003
HA-Wide A/E	3-31-2003	9-30-2003
14-1 & 2	3-31-2003	9-30-2003
HA-Wide Office /Residents	3-31-2003	9-30-2003

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Total estimated cost over next 5 years				

## Optional Public Housing Asset Management Table

See Technical Guidance for instructions on the use of this table, including information to be provided.

Public Housing Asset Management								
Development Identification		Activity Description						
Name, Number, and Location	Number and Type of units	Capital Fund Program Parts II and III <i>Component 7a</i>	Development Activities <i>Component 7b</i>	Demolition / disposition <i>Component 8</i>	Designated housing <i>Component 9</i>	Conversion <i>Component 10</i>	Home-ownership <i>Component 11a</i>	Other (describe) <i>Component 17</i>
14-1	100		None	None	None	None	None	None
Rose St.	Family/Eld	Comprehensive						
Pomona St.		Stock Assessment						
Broadway								
Hutchinson St.								
14-2	49	Comprehensive	None	None	None	None	None	None
Cushman Ave./Coole dge St.		Stock Assessment						
14-3	45	Comprehensive	None	None	None	None	None	None
Harris St.	Elderly	Stock Assessment						



## **EXHIBIT “A”**

### **MISSION STATEMENT**

The Revere Housing Authority (RHA) is a public agency established under the Massachusetts General Laws Chapter 121B. Its primary mission is to provide decent, safe and sanitary housing opportunities, thereby improving the quality of life in a cost-effective manner. By partnering with others, we offer rental assistance and other related services to our community in a non-discriminatory manner.

Further, the Revere Housing Authority shall endeavor to petition HUD in order to seek funding for additional construction of both elderly and family housing.



## **EXHIBIT “B”**

### **GOALS**

#### **Revere Housing Authority Goals – Expand the supply of assisted housing objectives:**

Manage the Revere Housing Authority’s existing public housing programs in an efficient and effective manner, thereby, qualifying as a high performer with HUD by December 31, 2004.

The Revere Housing Authority shall promote a motivating work environment with a capable and efficient team of employees to operate as a customer-friendly and fiscally prudent leader in the affordable housing industry.

## **EXHIBIT “C”**

### **Goal – RHA goal to improve the quality of assisted housing:**

Provide a safe and secure environment in the Revere Housing Authority’s public housing developments.

The Revere Housing Authority shall reduce crime in its developments so that the crime rate is less than their surrounding neighborhood by December 21, 2004.

The Revere Housing Authority shall work between the jurisdiction’s police force and this Authority. The purpose of this is to better define the “edge problem” of crime that occurs near our Developments and develop strategies for identifying and reducing this problem.

## **EXHIBIT “D”**

### **Goal – Increase assisted housing choices:**

Expand the range and quality of housing choices available to participants in the Revere Housing Authority’s tenant-based assistance program.

The Revere Housing Authority shall achieve and sustain a utilization rate of 98% by December 21, 2004, in its tenant-based program.

The Revere Housing Authority shall attract new landlords who want to participate in the program by December 31, 2004.

## **EXHIBIT “E”**

### **C. STRATEGY FOR ADDRESSING NEEDS**

Since the Revere Housing Authority (RHA) has a very limited number of federally funded public housing units, 93 elderly units and 101 family units, turnover of said units is small. The RHA is addressing the needs of the community at-large by granting as many Section 8 vouchers as possible. However, Section 8 voucher holders are having a difficult time finding affordable units, since the market in the area is very tight. The RHA works with other agencies in the area to help said participants maximize their housing search efforts. Also, when people apply for conventional housing they are placed on the State Housing List as well as the Federal Housing List. Since RHA has more State funded housing than Federal, applicants move through the State Waiting List more quickly than Federal. RHA also has an aggressive policy in regard to rent collection and rule enforcement leading to eviction of undesirable tenants in the Federal Housing developments.

## **EXHIBIT “F”**

### **FLAT RENT SCHEDULE adopted by the Board of Commissioners**

For Federal public housing programs, and in accordance with the Quality Housing and Work Responsibility Act (QHWRA), the Revere Housing Authority will offer two (2) rent options to public housing families.

Commissioner Irving Greenberg introduced the Resolution as follows:

Option #1 – Income Based Rent – A public housing resident/family may choose to have their rent determined as a percentage of their family’s monthly adjusted income. The total tenant payment will not exceed 30% of the family’s adjusted income. In determining rents, the RHA will factor in all HUD mandatory deductions, Rents are determined annually.

Option #2 – Flat Rent – A public housing resident/family may choose, as flat rents, by the Board of Commissioners, as follows:

One bedroom	\$ 700.00
Two bedrooms	800.00
Three bedrooms	950.00
Four bedrooms	1,050.00
Five bedrooms	1,150.00

Family choice of rental payment:

1. The RHA will allow families residing in public housing to elect annually whether to pay income-based rent or flat rent.
2. Flat rents are a function of the formula-based rent in that when the RHA establishes Flat Rents, the family is then charged THE LESSER of the TTP or the Flat Rent.
3. RHA must continue to conduct annual reexaminations for all families in public housing.
4. Families with flat rents must be given a reduced rent if their income goes down.
5. Flat rents may be elected for three (3) years.

Commissioner Dominic Bocchino made a motion to approve and adopt the Resolution which was seconded by Commissioner John J. Marco.

VOTED: To approve and adopt flat rents in public housing  
As follows: One bedroom \$700; Two bedrooms  
\$800; Three bedrooms \$950; Four bedrooms  
\$1,050; Five bedrooms \$1,150.

ROLL CALL SHOWED THE FOLLOWING:

VOTED:  
AYES: Bocchino – Greenberg– Marco – Anzuoni  
NAYS: None  
ABSENT: Mazzone

The Chairman thereupon declared said motion carried and Resolution adopted.

**EXHIBIT “G”**  
**PHA Plan**  
**Table Library**

**Component 7**  
**Capital Fund Program Annual Statement**  
**Parts I, II, and II**

**Annual Statement**  
**Capital Fund Program (CFP) Part I: Summary**

Capital Fund Grant Number MA06P01491599 FFY of Grant Approval: (10/1999)

☐ Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	55,000.00
4	1410 Administration	32,199.00
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	30,000.00
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	20,000.00
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Nondwelling Structures	180,000.00
13	1475 Nondwelling Equipment	15,000.00
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	332,199.00
21	Amount of line 20 Related to LBP Activities	0.00
22	Amount of line 20 Related to Section 504 Compliance	0.00
23	Amount of line 20 Related to Security	0.00
24	Amount of line 20 Related to Energy Conservation Measures	0.00

**Annual Statement****Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
14-1,-2,-3	Administration	1410	32,199.00
14-1,-2,-3	Management	1408	55,000.00
14-1,-2,-3	Addition to Community Room	1470	50,000.00
14-1,-2,-3	New Office – Section 8	1470	130,000.00
14-1,-2	Turfcat Mowing	1475	15,000.00
14-1,-2,-3	A/E Fees	1430	30,000.00
14-3	Fire Alarm Update	1460	20,000.00



### Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
14-1,-2,-3 Admin.	0.00	0.00
14-1,-2,-3 Management	0.00	0.00
14-1,-2,-3 Addtion to Community Room	0.00	0.00
14-1,-2,-3 New Office – Section 8	0.00	0.00
14-1,-2,-3 Turfcat Mowing	0.00	0.00
14-1,-2,-3 A/E Fees	0.00	0.00
14-3 Fire Alarm Update	0.00	0.00

## EXHIBIT “H”

### Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
14-1	Rose St./Pomona St.	-0-	-0-	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Site Work—Replanting shrubs, etc.			100,000.00	2001
Repainting—29buildings			100,000.00	2001
Management			100,000.00	2002
Resident Assoc. Office & Furniture			50,000.00	2001
Total estimated cost over next 5 years			350,000.00	

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
14-2	Cooledge St. / Cushman Ave.	-0-	-0-	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Site Work			50,000.00	2002
Repainting—11 buildings			50,000.00	2001
Weatherization & Caulking			50,000.00	2002
Security Lighting			10,000.00	2001
New doors both exterior/interior			50,000.00	2002
Community Room/Office			200,000.00	2003
Total estimated cost over next 5 years			410,000.00	

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
14-3	2 Harris Street	-0-	-0-
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Site Work—planting shrubs, trees, etc.		20,000.00	2001
Community Room—upgrade		20,000.00	2002
Roofing Rehab		50,000.00	2002
<b>Total estimated cost over next 5 years</b>		<b>90,000.00</b>	

### **Optional Public Housing Asset Management Table**

See Technical Guidance for instructions on the use of this table, including information to be provided.

[illegible]

## **EXHIBIT “T”**

### **REVERE HOUSING AUTHORITY COMPREHENSIVE PLAN**

**Legal Counsel presented the following as the proponent for Revere Housing Authority staff at the Public Hearing on Friday, September 14, 2001.**

In accordance with Quality Housing and Work Responsibility Act (QHWRA)...the Revere Housing Authority (RHA)...has filed with the RHA Board of Commissioners and made public its Comprehensive Plan; forty-five (45) days prior to this hearing.

In accordance with the Interim Rule 24 CFR Part 903...Public Housing Agency Plan, the act sets out the need and benefits of Comprehensive Planning for PHAs.

The most significant changes under the Act is the introduction to the Comprehensive Five Year Plan... (FY 2000-2004).

#### **THE PLAN:**

The plan establishes a MISSION STATEMENT for PHAs along with the PHA's long-range goals and objectives...for achieving its Mission Statement over the next five (5) years...

#### **HUD Strategic goal: “Increase the availability of decent, safe, and affordable housing.”**

To address this goal, the Revere Housing Authority has set forth in the plan:

1. goals for expansion of its supply of housing...
  - by applying for additional rental vouchers; and
  - by reducing public housing vacancies.
2. goals for improvement of the quality of assisted housing...
  - by increasing tenant satisfaction;
  - by concentrating on efforts to improve specific management functions;
  - by renovating and modernizing existing housing units.
3. goals for increasing assisted housing choices...
  - by conducting outreach efforts to potential voucher landlords;
  - by increasing voucher payment standards.

#### **HUD Strategic goal: “Improve the community quality of life and economic vitality.”**

To address this HUD goal, the RHA has set forth in the plan...

1. to provide an improved living environment...
  - by implementing measures to deconcentrate poverty by bringing higher income households into lower income developments;
  - by implementing measures to promote income mixing in public housing by assuring access for lower income families into higher income developments;
  - by implementing public housing security improvements.

**HUD Strategic goal: “Promote self-sufficiency and asset development of families and individuals.”**

To address this HUD goal, the RHA has set forth in the plan...

1. goal to promote self-sufficiency and asset development of resident households...
  - by providing or attracting supportive services to improve assistance which shall enhance the employability of RHA residents;
  - by providing supportive services to increase independence for elderly families with disabilities.

**HUD Strategic goal: “Ensure equal opportunity for all Americans.”**

To address this HUD goal, the RHA has set forth in the plan...

1. goal to ensure equal opportunity and affirmatively further fair housing...
  - by undertaking affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.

**RESPECTING THE ANNUAL PLAN  
RHA FOR FISCAL YEAR 2001**

The RHA has submitted a streamlined plan in accordance with 24 CFR Part 903.7 respecting Standard PHAs and for a PHA with less than 250 federal units.

In its EXECUTIVE SUMMARY, the RHA sets out its major initiatives and discretionary policies which the RHA has included in its Annual Plan Submission...

\*Wherein the RHA has committed to comply with HUD mandates...ensuring the promotion of safe, decent and affordable housing;

\*The RHA continued commitment for an improved and secure environment for its residents by working with law enforcement to reduce crime...in concert with its FY 2001 Drug Elimination Grant;

\*Along with RHA's efforts to increase outreach programs in order to target the needs of all segments of its resident community;

\*The RHA has adopted three local preferences...to ensure that REVERE working families and victims of domestic violence will be assisted in an expeditious manner;

\*The RHA has adopted a deconcentration policy...to ensure a mixed income setting in its residential developments;

\*The RHA has adopted a minimum rent of \$25.00...to recognize the hardship times that residents may encounter during their tenancy, while at the same time recognizing the RHA's commitment to continue to operate the authority in a fiscally sound manner.

**The RHA plan as submitted addressed several areas:**

During the last twelve months the RHA staff and members of the Resident Advisory Board (RAB) have met on many occasions to review and discuss in detail the submission.

The Revere Housing Authority has had many meetings with the Revere Advisory Board over the past twelve months. Each line item on the Annual Plan was discussed at length and the action that would be taken by RHA was endorsed by the RAB.



*Hi Charlie:*

*Sorry that I couldn't get this off to you early in the day but I had a little more to do at the hospital and looking over the RAB report I fully agree to everything in contents spending as much time we did paid off as everything seems to be in order I'm well satisfied with everything. Thanks for all your help is putting this report together.*

*Bill DeMarco*

## **Exhibit K**

### **REVERE HOUSING AUTHORITY 70 COOLEDGE STREET REVERE, MA 02151**

#### **PET GUIDELINES FOR RESPONSIBLE COMPANION PET OWNERSHIP FOR 14-1 & 14-2 HOUSING PROGRAMS**

##### **GUIDELINES**

1. Any resident who wishes to own or keep a companion animal will inform management in writing. If management feels a pet is inappropriate, management will inform resident. Permission for a specific pet will not be unreasonably withheld. A "Pet Lease Rider" must be signed immediately by the resident (Head of Household). All pet owners must be able to control their pets via a leash, pet carrier, crate or cage.
2. A companion animal is defined as a common household pet which includes and is not limited to a dog, cat, bird, or fish. Reptiles, rodents, and birds of prey are not household pets.
3. Residents may have one (1) dog, or one (1) cat per unit, or two (2) caged birds and will be limited to a 20-gallon aquarium for fish only. If a resident desires to have more than one pet or a larger aquarium, the resident must get the EXPRESSED WRITTEN PERMISSION from the management office.
4. The mature size of a newly acquired dog is limited to a weight not to exceed sixty (60) pounds.
5. Dogs of a vicious or aggressive disposition will not be permitted. Due to age and behavioral activities of puppies and kittens, applications for ownership of such young animals shall be more closely reviewed prior to approval.
6. All female dogs over the age of six (6) months and female cats over the age of five (5) months must be spayed. All male dogs over the age of eight (8) months and male cats over the age of ten (10) months must be neutered. If health problems prevent such spaying, a veterinarian's certificate will be necessary to allow the pet to become a resident of the development and the exception will be at the Executive Director's discretion.
7. Management reserves the right to require dog owners to relocate to a comparable unit on the ground floor of their building based upon written complaints concerning:
  - (A) The behavior of the dog in the elevator or hallways, or
  - (B) The documented medical condition of residents affected by the presence of the dog.
8. Residents are expressly prohibited from feeding or harboring stray animals.

## **TENANT OBLIGATIONS**

1. The pet owner will be responsible for proper pet care: good nutrition, grooming, exercise, flea control, routine veterinary care and yearly inoculations. Dogs and cats **MUST** wear identification tags and a collar when outside the unit.
2. The pet owner is responsible for cleaning up after pet(s) inside the unit and anywhere on the development property. A “pooper scooper” and disposable plastic bags should be carried by the owner. All waste will be bagged and disposed of in a receptacle determined by management. Toilets are not designed to handle pet litter. Under no circumstances should any pet debris be deposited in a toilet as blockages will occur. Tenants will be responsible for the cost of repairs or replacement of any damaged toilets or pipes.
3. The pet owner will keep the unit and its patio, if any, clean and free of pet odors, insect infestation, waste, and litter. The pet owner is to maintain their unit in a sanitary condition at all times.
4. The pet owner will restrain and prevent pet from gnawing, chewing, scratching or otherwise defacing: doors, walls, windows, and floor coverings of the unit, other units, common areas, shrubbery, and landscaping of the facility.
5. Pets are not to be tied outside or left unattended anywhere on RHA property.
6. Residents will not alter their unit, patio, or other outside area to create an enclosure for an animal.
7. Pets must be restrained at all times, when outside the unit on RHA property.
8. Visitors with pets will be allowed, the resident **MUST** inform management, in writing, the pet information and the duration of the stay. Visitors must conform to the guidelines prescribed here.
9. Pets will not be allowed to interfere with the health, safety, rights, comfort, or quiet enjoyment of other residents. A pet will not create a nuisance to neighbors with excessive barking, whining, chirping or other unruly behavior. If this behavior happens on a continuing basis the resident will be asked to remove the pet from RHA property.
10. Pet owners will agree to quarterly unit inspections to be sure that pets and units are being cared for properly. These inspections may be reduced or increased in intervals at management discretion.

11. The tenant is responsible for providing management with the following information and documents which are to be kept on file in the tenant's folder:
  - a. A color photo and identifying description of the pet.
  - b. Attending veterinarian's name, address and phone number.
  - c. Veterinary certificates of spaying or neutering, rabies, distemper combination, parvovirus, feline VRC, feline leukemia testing and other inoculations when applicable.
  - d. Dog licensing certificates in accordance with local and state law.
  - e. Two (2) alternative caretakers who will assume immediate responsibility for the care of the pet should the owner become incapacitated, information must include name, address, and telephone number. These caretakers must sign the Pet Lease Rider acknowledging their responsibilities as specified.
  - f. Emergency boarding accommodations.
  - g. Temporary ownership (overnight or short term) shall be registered with management under the pet rules and regulation.
12. The pet owner will be responsible to comply with all applicable State and Local requirements.

**The tenant is responsible for keeping management informed of any change of information.**

#### **MANAGEMENT RESPONSIBILITIES**

1. Establishment of a Pet Committee consisting of animal owners, non-animal owners, local humane groups, and veterinarians, etc.
2. Specific instructions for disposal of pet waste and kitty litter must be posted in each building.
3. Facility's rules and regulations of companion animal ownership must be posted and enforced in a fair and just manner.
4. Proper record keeping of: owner's and pet's information, pet participation fee, deposits, apartment inspections, investigations of complaints, and issuing of warnings, billing for damages, scheduling for repairs, etc.
5. Declawing of cats and the removal of a dog's vocal chords **CANNOT** be required by management.
6. All written complaints shall be referred to the Pet Committee for resolution. No credence shall be given by the Pet Committee to verbal or unsigned complaints. Management will also inform the resident of any other rule infractions and will duly notify the Pet Committee for attempted resolution.

7. Upon second notice of a written legitimate complaint from the Pet Committee to the tenant, the resident shall be advised that a further notice shall be cause for termination of the Pet Rider provisions; except that in the case of a serious problem, e.g. a vicious dog, this procedure may be shortened in the interest of public safety.

### **PET PARTICIPATION FEE**

1. A non-refundable pet fee of \$50.00 shall be charged for each dog or cat in a unit. This amount may be payable in two (2) monthly installments.
2. A fee, in graduating amounts, not to exceed \$25.00, shall be collected from pet owners failing to clean up after their animals. The fee schedule is as follows:

1 <sup>st</sup> offense	Warning
2 <sup>nd</sup> offense	\$ 5.00
3 <sup>rd</sup> offense	\$10.00
4 <sup>th</sup> offense	\$15.00
5 <sup>th</sup> offense	\$20.00
6 <sup>th</sup> and subsequent offense	\$25.00
3. The above collected funds will be placed in a separate account that will be maintained by RHA. This fund will be used to cover the cost incurred by the Housing Authority in the event that a pet-related emergency occurs. Such emergencies include, but are not limited to, death of a resident, long-term hospitalization of a resident. Also, RHA may purchase supplies when deemed necessary by RHA and the Federal Pet Committee. No funds will be disbursed without the consent of the Pet Committee.

### **LIABILITY OF PET OWNER FOR DAMAGE OR INJURY**

1. Repairing or replacing damaged areas of the exterior, interior, doors, walls, floor coverings and fixtures in the unit, common areas or other areas damaged by tenant's pets.
2. Cleaning, deodorizing and sanitizing carpeting and other floor coverings in the unit as necessitated by presence of pet.
3. Charges for damage will include materials and labor. Payment plans will be negotiated between management and the pet owner. Disputes concerning amount of damages are subject to the grievance procedures provided for in HUD regulations.

### **PET COMMITTEE**

1. Each housing development shall establish a Pet Committee that is responsible for resolving complaints which may arise at each development. The Committee should consist of pet owning tenants, non-pet owning tenants, local interested humane groups, veterinarians and community volunteers. A community volunteer shall not be affiliated with the local housing authority other than a member of the Pet Committee. Nor shall a community volunteer be a member of the immediate family of a person who is affiliated

with the local housing authority. The number of individuals should be uneven, three (3) or five (5), to allow for a majority rule in the event of a vote decision.

2. The purpose of the Committee is to alleviate the housing manager's involvement with tenants' questions and complaints concerning companion animals. The Committee should also monitor how the ownership of pets affects the quality of life for both pet-owning tenants and non-pet owning tenants and report any recommendations to management.
3. The Committee could assist tenants with the following:
  - a. veterinary care—discounts for seniors and pets, low-cost spaying and neutering;
  - b. pet behavior consultants for obedience problems;
  - c. local humane societies that would assist with any problems arising in the facility;
  - d. information on proper pet care and responsible pet ownership;
  - e. will notify management of any unresolved complaints.

### **RESOLUTION OF COMPLAINTS**

1. The Pet Committee will be responsible for resolving complaints which may arise at each development. The Committee will be the first line of complaint receipt as well as complaint resolution. Written complaints will be made to the Pet Committee which will approach the pet owner about such complaints and attempt to reach a resolution with the pet owner.

The Pet Committee shall work in locating and using resources to help tenants and management in the solution of pet problems.

### **PET GRIEVANCE PANEL**

Should the Pet Committee be unable to resolve a complaint, the complainant will request a hearing within ten (10) days of the Pet Grievance Panel.

1. The Pet Grievance Panel, which will consist of a representative of management, a representative of the Pet Committee other than the pet owner in question, drawn by lot, and a representative of the Massachusetts Society for the Prevention of Cruelty to Animals may require that a pet be permanently removed if the violation of the Pet Policy is a serious violation, one which causes harm to tenants, significant damage to property, or creates a health or safety hazard.
2. The representative of management will arrange meetings of the Pet Grievance Panel for hearings to appeal the decision of the Pet Committee. The Pet Grievance Panel will hear appeals of decisions regarding pets only if the person requesting a hearing agrees to the following conditions:
  - a. The jurisdiction of the Grievance Panel as stated in the Pet Lease Rider.
  - b. The Pet Grievance Panel can require permanent removal of a pet, after notice and hearing, and can further determine if the tenant may replace the pet with another pet.
  - c. Non-compliance with the decision of the Pet Grievance Panel is sufficient cause for termination of the tenant's dwelling lease with the housing authority.

### **PROTECTION OF PET**

1. Identification cards, carried in purse or wallet, naming veterinarian and caretaker should be with the pet owner at all times. In the event of a sudden illness or accident, attending authorities would notify management to assist the pet and avoid a delay in proper care of the animal.
2. No pet is to remain unattended, without proper care, for more than 24 hours, except in the case of a dog which shall be no more than 12 hours.
3. If the health or safety of a companion animal is threatened by incapacity or death of the owner, the Pet Committee and/or management will contact the caretakers designated by tenant.

### **REMOVAL OF PET**

1. If caretakers are unable or unwilling to assume responsibility for the pet and tenant is unable to locate alternate, management may enter the premises, remove the pet, and arrange for pet care for no less than ten (10) days to protect the pet. Funds for such care will come from the tenant's pet fee. The management may contact the Massachusetts Society for the Prevention of Cruelty to Animals or other suitable humane society for assistance in providing alternate arrangements for the care of the pet if the caretaker cannot be located.
2. Termination of Lease proceedings may be instituted if the pet owner is in violation of these guidelines which the pet owner has agreed to abide by in signing the Lease Pet Rider attached to the Lease. Termination of lease proceedings may also be instituted if the pet owner has been warned three (3) times by the Pet Committee.

### **PET LEASE RIDER**

This pet rider to the lease between \_\_\_\_\_ (Resident)  
And **Revere Housing Authority** (Management), is made a part of the Lease entered between  
parties on \_\_\_\_\_ (Date).

Under Massachusetts law, the owner or “keeper” of a dog is responsible for any injury or damage caused by the dog. The only exception to this responsibility is when the owner or keeper can prove that the person who was injured had been tormenting or teasing the dog.

It does not matter whether the dog had ever bitten anyone before. Nor would it matter that the owner believed the dog to be friendly, and the dog does not necessarily have to “bite” someone for the owner to be responsible.

Your responsibility as a dog owner, therefore, extends to many people who might come in contact with the dog.

A dog owner may be insured for the dog’s conduct under a standard “tenant’s insurance policy.” Such a policy generally costs approximately one hundred dollars (\$100.00) and protects the dog owner against a number of other liabilities in addition to dog bites.

The Revere Housing Authority will not be responsible for any injury or damage caused by your dog. **It is suggested that you carry an insurance policy for your own protection.**

1. Both parties have read, agreed to, and signed the attached pet guidelines in effect for the complex.
2. The resident will keep his/her pet in a reasonable manner and provide proper care for it as provided in said pet guidelines.
3. In accordance with the Pet Guidelines, the resident will provide the name, address and telephone number, in the space provided below, or two (2) pet caretakers who, by signing this form, will assume responsibility for the pet should the resident become unable to care for the pet, including any damages or medical expenses. Resident will also provide the name, address and telephone number of the veterinarian responsible for the pet’s health care.



**PET CARETAKER #1**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**PET CARETAKER #2**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**VETERINARIAN**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

4. If resident is unable to provide the name of a pet caretaker, he/she will provide details of other arrangements which have been made for the proper care of the pet.
5. The pet owner agrees to abide by each rule enumerated in the Pet Guidelines as outlined above, attached hereto, and incorporated by reference, and further agrees to abide by any decision of the Pet Grievance Panel should a complaint arise.
6. Non-compliance with the decision of the Pet Grievance Panel shall be sufficient cause for termination of the residential lease to which this rider is attached.
7. It is the pet owner's responsibility to update the information listed in item 3.

**INDEMNIFICATION OF AUTHORITY:**

The owner or keeper of the dog shall defend, indemnify and hold harmless the Authority, their officers, agent, employees and assigns against any and all actions, liability, loss, damages, costs, expenses, including attorney's fees, for personal injury or damage to real or tangible personal property which the Authority may sustain, incur or be required to pay, arising out of or by reason of any conduct, action or incident, arising out of the care, keeping, or ownership of the dog.

The owner or keeper of the dog assumes its obligations to defend, indemnify and hold harmless, the Authority of any claim.

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(Tenant)

---

(Date)

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REVERE HOUSING AUTHORITY

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(Date)

**REVERE HOUSING AUTHORITY  
70 COOLEDGE STREET  
REVERE, MA 02151**

**PET REGISTRATION FORM  
14-1 & 14-2 FEDERAL FAMILY**

NAME OF OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TELEPHONE# \_\_\_\_\_

BREED OF PET: \_\_\_\_\_ CAT \_\_\_\_\_ DOG \_\_\_\_\_

NAME OF PET: \_\_\_\_\_

AGE OF PET: \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_ COLOR \_\_\_\_\_

SPAYED/NEUTERED: YES \_\_\_\_\_ NO \_\_\_\_\_

CURRENT VACCINATIONS: YES \_\_\_\_\_ NO \_\_\_\_\_

VET. CERTIFICATION/RABIES VAC: YES \_\_\_\_\_ NO \_\_\_\_\_

PET LICENSED: YES \_\_\_\_\_ NO \_\_\_\_\_

LICENSE PROVIDED: YES \_\_\_\_\_ NO \_\_\_\_\_

TENANT'S INSURANCE POLICY INSURANCE RIDER PROVIDED: YES \_\_\_ NO \_\_\_

PET FEE \$50.00 PER PET

AMOUNT PAID: \$ \_\_\_\_\_

DATE PAID: \_\_\_\_\_

PET FEE PAYABLE OVER A PERIOD OF TWO MONTHS)

DATE RECEIVED: \_\_\_\_\_

BY: \_\_\_\_\_

## **DECONCENTRATION POLICY**

**It is the Revere Housing Authority's policy to provide for deconcentration of poverty and encourage income mixing by bringing higher income families into lower income development and lower income families into higher income developments. Toward this end, we will skip families on the waiting list to reach other families with a lower or higher income. We will accomplish this in a uniform and non-discriminating manner.**

**The Revere Housing Authority will affirmatively market our housing to all eligible income groups. Lower income residents will not be steered toward lower income developments and higher income people will not be steered toward higher income developments.**

**Prior to the beginning of each fiscal year, we will analyze the income levels of families residing in each of our developments, the income levels of census tracts in which our developments are located, and the income levels of the families on the waiting list. Based on this analysis, we will determine the level of marketing strategies and deconcentration incentives to implement.**

## **DECONCENTRATION INCENTIVES**

**The Revere Housing Authority may offer one or more incentives to encourage applicant families whose income classification would help to meet the deconcentration goals of a particular development.**

**Various incentives may be used at different times, or under different conditions, but will always be provided in consistent and nondiscriminatory manner.**

## **OFFER OF A UNIT**

**When the Revere Housing Authority discovers that a unit will be available, we will contact the first family on the waiting list who has the highest priority for this type of unit or development and whose income category would help to meet the deconcentration goal and/or income targeting goal.**

**The Revere Housing Authority will contact the family first by telephone to make the unit offer. If the family cannot be reached by telephone, the family will be notified of a unit offer via first class mail. The family will be given five (5) business days from the date the letter was mailed to contact the Revere Housing Authority regarding the offer.**

**The family will be offered the opportunity to view the unit. After the opportunity to view the unit, the family will have two (2) business days to accept or reject the unit. This verbal offer and family's decision must be documented in the tenant file. If the family rejects the offer of the unit, the Revere Housing Authority will send the family a letter documenting the offer and the rejection.**

#### **REJECTION OF UNIT**

**If in making the offer to the family the Revere Housing Authority skipped over other families on the waiting list in order to meet their deconcentration goal or offered the family any other deconcentration incentive and the family rejects the unit, the family will not lose their place on the waiting list and will not be otherwise penalized.**

**If the Revere Housing Authority did not skip over families on the waiting list to reach the family, did not offer any other deconcentration incentive, and the family rejects the unit without good cause, the family will forfeit their application's date and time. The family will keep their preferences, but the date and time of the application will be changed to the date and time the unit was rejected**

**If the family rejects with good cause any unit offered, they will not lose their place on the waiting list. Good cause includes reasons related to health, proximity to work, school, and childcare (for those working or going to school). The family will be offered the right to an informal review of the decision to alter their application status.**



## Exhibit M

The name of our Federal Tenant Representative on the Board of Commissioners is:

Mr. Fred Engber  
2 Harris St., # 16  
Revere, Ma. 02151

The following are the federal tenants who participated on the RAB:

- William DeMarco
- Michelle Coolong
- Christine Gordon
- Henry Mancini
- Nancy Bernard
- Fred Engber, before he became a commissioner.

## **CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHA Name: Revere Housing Authority		Grant Type and Number Capital Fund Program Grant No: CIAP MA06P014914 Replacement Housing Factor Grant No:			Federal FY of Grant: 1998
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
X Performance and Evaluation Report for Period Ending: 01/01/01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	143362	0	143362	143362
3	1408 Management Improvements	38496	0	38496	38496
4	1410 Administration	81794	0	81794	75829
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	18890	0	18890	18890
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	176081	0	176081	176081
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	93805	0	93805	93805
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				



<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> Revere Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: CIAP MA06P014914 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 1998
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )           X Performance and Evaluation Report for Period Ending: 01/01/01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
21	Amount of Annual Grant: (sum of lines 2 – 20)	552428	0	552428	546463
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

[illegible]

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

[illegible]

# Capital Fund Program Five-Year Action Plan

## Part I: Summary

PHA Name Reverse					
Development Number/Name/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement	N/A	N/A	N/A	N/A
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

## Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : ____ FFY Grant: _____ PHA FY: _____			Activities for Year: ____ FFY Grant: _____ PHA FY: _____		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See						
Annual						
Statement						
Total CFP Estimated Cost			\$			\$

## Capital Fund Program Five-Year Action Plan

### Part II: Supporting Pages—Work Activities

Activities for Year : ____ FFY Grant: PHA FY:			Activities for Year: ____ FFY Grant: PHA FY:		
<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>
<b>Total CFP Estimated Cost</b>		\$			\$

## **CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHA Name: Revere		Grant Type and Number Capital Fund Program Grant No: CIAPMA06P0145915 Replacement Housing Factor Grant No:			Federal FY of Grant: 1999
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<b>X Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	310449	310449	310449	310449
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	7450	7450	7450	7450
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	14300	14300	14300	14300
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> Revere		<b>Grant Type and Number</b> Capital Fund Program Grant No: CIAPMA06P0145915 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 1999
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<b>X Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	332199	332199	332199	332199
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				



## Part II: Supporting Pages

Capital Fund Program Tables Page 10

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

[illegible]



# Capital Fund Program Five-Year Action Plan

## Part I: Summary

PHA Name					
<div style="text-align:center;">Development Number/Name/HA- Wide</div>	<div style="text-align:center;">Year 1</div>	<div style="text-align:center;">Work Statement for Year 2  FFY Grant: PHA FY:</div>	<div style="text-align:center;">Work Statement for Year 3  FFY Grant: PHA FY:</div>	<div style="text-align:center;"><input type="checkbox"/>Original 5-Year Plan <input type="checkbox"/>Revision No:  Work Statement for Year 4  FFY Grant: PHA FY:</div>	<div style="text-align:center;">Work Statement for Year 5  FFY Grant: PHA FY:</div>
	<div style="text-align:center; background-color:#cccccc;">Annual Statement</div>				
	<div style="background-color:#cccccc;"></div>				
	<div style="background-color:#cccccc;"></div>				
	<div style="background-color:#cccccc;"></div>				
	<div style="background-color:#cccccc;"></div>				
	<div style="background-color:#cccccc;"></div>				
	<div style="background-color:#cccccc;"></div>				
	<div style="background-color:#cccccc;"></div>				
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

## Capital Fund Program Five-Year Action Plan

### Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : ____ FFY Grant: ____ PHA FY: ____			Activities for Year: ____ FFY Grant: ____ PHA FY: ____		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See						
Annual						
Statement						
Total CFP Estimated Cost			\$			\$

## Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities

[illegible]

## **CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHA Name: Revere Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P01450100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	250693	0	250693	12970
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	7450	0	7450	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	14300	0	14300	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Revere Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P01450100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	272443	0	272443	12970
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

[illegible]

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

[illegible]



**Capital Fund Program Five-Year Action Plan**  
**Part I: Summary**

PHA Name				<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

## Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities

[illegible]

## Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities

<b>Part C - CFP</b> Activities for Year : ____ FFY Grant: ____ PHA FY: ____			<b>Part C - CFP</b> Activities for Year: ____ FFY Grant: ____ PHA FY: ____		
<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>
<b>Total CFP Estimated Cost</b>		<b>\$</b>			<b>\$</b>

# Public Housing Drug Elimination Program Plan

**Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.**

## Annual PHDEP Plan Table of Contents:

1. General Information/History
2. PHDEP Plan Goals/Budget
3. Milestones
4. Certifications

## Section 1: General Information/History

**A. Amount of PHDEP Grant** \$44,469

**B. Eligibility type (Indicate with an "x")** N1 \_\_\_\_\_ N2 \_\_\_\_\_ R X \_\_\_\_\_

**C. FFY in which funding is requested** 2001

### **D. Executive Summary of Annual PHDEP Plan**

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

PHDEP sponsored activities and services offered by the RHA in collaboration with Community Action Programs Inter-City, Inc. (CAPIC), the Revere Police Department, and Chelsea ASAP continue to encourage and promote an anti-drug lifestyle and the value of law enforcement. 475 youths participated in Police Activity sponsored basketball and floor hockey leagues, with an additional 29 receiving free Martial Arts training. A key factor in the success of the PHDEP has been the implementation of an advanced Community Policing strategy in and around RHA property, this strategy combined with heightened law enforcement has had a direct effect on the number of calls for service and reported crimes since the fruition of the Project. These initiatives have increased police visibility, improved residents and police, especially youth; hence fulfilling stated goals and objectives. The RHA remains committed to working towards the total elimination of related drug activities and crime.

### **E. Target Areas**

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)
All Federal Sites	194	400

### **F. Duration of Program**

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

6 Months \_\_\_\_\_ 12 Months X \_\_\_\_\_ 18 Months \_\_\_\_\_ 24 Months \_\_\_\_\_ Other \_\_\_\_\_





## G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. For grant extensions received, place “GE” in column or “W” for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Anticipated Completion Date
FY 1995					
FY 1996					
FY 1997					
FY1998 X	97,000	MA06DEP0140197	0.00	N/A	12/30/99
FY 1999 X	42,668	MA06DEP0140199	0.00	N/A	12/30/00
FY 2000 X	44,469	MA06DEP0140100	44,469	N/A	07/24/03

## Section 2: PHDEP Plan Goals and Budget

### A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

The primary goal of the PHDEP Program at the Revere Housing Authority is to reduce and consequently eliminate drug related crime in and around public housing property. Since the implementation of this initiative in January of 1999, the RHA has worked diligently with project partners to attain this goal, and in turn improve the quality of life for public housing residents. Since that time, there has been a significant decrease in drug use and drug related crime, this can be attributed to heightened law enforcement, drug prevention and intervention services, alternative activities for youth (such as Police sponsored youth activities league and Martial Arts training), and employment readiness training. RHA in conjunction with project partners strives to make these activities and resources accessible to residents, while at the same time insure that resident's needs are addressed and realized. RHA through its collaboration with CAPIC will continue to utilize a Data Collection/Client Tracking System to analyze project progress, categorize resident service characteristics, capture pertinent information about crime locations, and determine resident eligibility for other PHDEP activities/services. RHA is dedicated to maintaining alternative activities, comprehensive support services, and community policing initiatives to the public housing community. These joint efforts are a crucial piece to realizing the overall goal to eliminate drug related crime.

### B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FY __ PHDEP Budget Summary	
Budget Line Item	Total Funding
9110 - Reimbursement of Law Enforcement	21,100
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	

9150 - Physical Improvements	
9160 - Drug Prevention	23,369
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
<b>TOTAL PHDEP FUNDING</b>	<b>44,469</b>

## C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement					Total PHDEP Funding: \$ 21,100		
Goal(s)	To continue the implementation of an advanced community policing .						
Objectives	To reduce & eliminate drug related crime by 25% within 24 months.						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.Community Policing			1-1-00	12-30-00			Crime data
2.Officer in Residence			3-1-98	12-30-00			Crime data
3.Police Sub-Station			4-1-98	12-30-00			Crime data

9120 - Security Personnel						Total PHDEP Funding: \$		
Goal(s)								
Objectives								
Proposed Activities	N/A	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1.								
2.								
3.								

9130 - Employment of Investigators						Total PHDEP Funding: \$		
Goal(s)								
Objectives								
Proposed Activities	N/A	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1.								
2.								
3.								

9140 - Voluntary Tenant Patrol		N/A	Total PHDEP Funding: \$
Goal(s)			
Objectives			

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					N/A		Total PHDEP Funding: \$	
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9160 - Drug Prevention					Total PHDEP Funding: \$ 23,369		
Goal(s)		To continue to provide preventive activities/services & drug resistance education to RHA residents					
Objectives		To reduce the risk of substance abuse among 200 RHA youth.					
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.Police Activities League	475	RHA Youth	1-1-00	12-30-00			Enrollment
2.DARE Services	475	RHA Youth	1-1-00	12-30-00			Enrollment
3. Martial Arts Training	29	RHA Youth	1-1-00	12-30-00			Enrollment

9170 - Drug Intervention					Total PHDEP Funding:		
Goal(s)	To provide drug counseling & intervention services to at-risk RHA youth & adults.						
Objectives	To improve the quality of life for 800 RHA residents.						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.Drug Counseling	8	Youth/Adults	1-1-00	12-30-00			
2.							
3.							

<b>9180 - Drug Treatment</b>					<b>Total PHDEP Funding: \$</b>		
------------------------------	--	--	--	--	--------------------------------	--	--

Goal(s)	To provide drug counseling & intervention services to at-risk RHA youth & adults.						
Objectives	To improve the quality of life for 800 RHA residents						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.Drug Counseling	8	Youth/Adults	1-1-00	12-30-00			
2.		Youth/Adults	1-1-00	12-30-00			
3.							

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)	To establish domestic violence support group for RHA residents						
Objectives	To provide support services to 25 RHA residents						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.Domestic Violence Coun.			1-1-00	12-30-00			
2.							
3.							

### **Section 3: Expenditure/Obligation Milestones**

Indicate by Budget Line Item and the Proposed Activity (based on the information contained in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25% of the total grant award) and obligated (at least 50% of the total grant award) within 12 months of grant execution.

Budget Line Item #	25% Expenditure of Total Grant Funds By Activity #	Total PHDEP Funding Expended (sum of the activities)	50% Obligation of Total Grant Funds by Activity #	Total PHDEP Funding Obligated (sum of the activities)
<i>e.g Budget Line Item # 9120</i>	<i>Activities 1, 3</i>		<i>Activity 2</i>	
9110				
9120				
9130				
9140				
9150				
9160				
9170				
9180				
9190				
<b>TOTAL</b>		\$		\$

#### **Section 4: Certifications**

A comprehensive certification of compliance with respect to the PHDEP Plan submission is included in the “PHA Certifications of Compliance with the PHA Plan and Related Regulations.”